



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

05/26/2006

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:	NJR000024638
INSTALLATION NAME:	BUTTERFLY PRESS LLC
INSTALLATION ADDRESS :	2 ANDERSON AVE MOONACHIE, NJ 07074
MAILING ADDRESS :	2 ANDERSON AVE MOONACHIE, NJ 07074

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056**

**TO: BUTTERFLY PRESS LLC
or Current Occupant
ATTN: JAY MAIDENBERG
2 ANDERSON AVE
MOONACHIE, NJ 07074**

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM	
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input type="checkbox"/> As a component of the Hazardous Waste Report	
2. Site EPA ID Number (page 14)	EPA ID Number: <u>N J R 0 0 0 0 2 4 6 3 8</u>	
3. Site Name (page 14)	Name: <u>Butterfly Press, LLC</u>	
4. Site Location Information (page 14)	Street Address: <u>2 Anderson Avenue</u> City, Town, or Village: <u>Moonachie</u> State: <u>NJ</u> County Name: <u>Bergen</u> Zip Code: <u>07074</u>	
5. Site Land Type (page 14)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other	
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	A. <u>3 2 3 1 1 0</u>	B. <u> </u>
	C. <u> </u>	D. <u> </u>
7. Site Mailing Address (page 15)	Street or P. O. Box: <u>Same as Item 4</u> City, Town, or Village: <u> </u> State: <u> </u> Country: <u> </u> Zip Code: <u> </u>	
8. Site Contact Person (page 15)	First Name: <u>Jay</u> MI: <u> </u> Last Name: <u>Maidenberg</u> Phone Number: <u>201-507-5151</u> Extension: <u> </u> Email address: <u> </u>	
9. Operator and Legal Owner of the Site (pages 15 and 16)	A. Name of Site's Operator: <u>Butterfly Press, LLC</u> Date Became Operator (mm/dd/yyyy): <u>February 1, 2006</u> Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other B. Name of Site's Legal Owner: <u>2 Anderson Owners Corp.</u> Date Became Owner (mm/dd/yyyy): <u>January 22, 1997</u> Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other	

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>62 Portsmouth Avenue</u>	
	City, Town, or Village: <u>Staten Island</u>	
	State: <u>NY</u>	
	Country: <u>USA</u>	Zip Code: <u>10301</u>

10. Type of Regulated Waste Activity

Mark ?Yes? or ?No? for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

☒ **1. Generator of Hazardous Waste**

If ?Yes?, choose only one of the following - a, b, or c.

- ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)
of non-acute hazardous waste; or
- ☒ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)
of non-acute hazardous waste; or
- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)
of non-acute hazardous waste

In addition, indicate other generator activities.

- ☐ **d. United States Importer of Hazardous Waste**
- ☒ **e. Mixed Waste (hazardous and radioactive) Generator**

☐ **2. Transporter of Hazardous Waste**☐ **3. Treater, Storer, or Disposer of****Hazardous Waste (at your site)** Note:
A hazardous waste permit is required for
this activity.☐ **4. Recycler of Hazardous Waste (at your
site)**☐ **5. Exempt Boiler and/or Industrial
Furnace**

If ?Yes?, mark each that applies.

- ☐ a. Small Quantity On-site Burner
Exemption
- ☐ b. Smelting, Melting, and Refining
Furnace Exemption

☐ **6. Underground Injection Control****B. Universal Waste Activities**

- ☐ **1. Large Quantity Handler of Universal Waste (accumulate
5,000 kg or more) [refer to your State regulations to
determine what is regulated]. Indicate types of universal
waste generated and/or accumulated at your site. If ?Yes?,
mark all boxes that apply:**

	Generate	Accumulate
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

☒ **2. Destination Facility for Universal Waste**

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

☐ **1. Used Oil Transporter**
If ?Yes?, mark each that applies.

- ☐ a. Transporter
- ☐ b. Transfer Facility

☐ **2. Used Oil Processor and/or Re-refiner**
If ?Yes?, mark each that applies.

- ☐ a. Processor
- ☐ b. Re-refiner

☐ **3. Off-Specification Used Oil Burner**☐ **4. Used Oil Fuel Marketer**
If ?Yes?, mark each that applies.

- ☐ a. Marketer Who Directs Shipment of
Off-Specification Used Oil to
Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the
Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 21.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	F003					

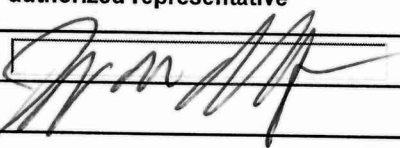
B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

N/A						

12. Comments (See instructions on page 21.)

1. Butterfly Press, LLC is submitting this form to notify the EPA and NJDEP that they are the new operator of this site.

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Jay Maidenberg, Plant General Manager	4/28/06

COMPLIANCE MANAGEMENT INTERNATIONAL

Excellence in Regulatory Management

2006 MAY 22 PM 12:01

RCRA PROGRAMS
BRANCH

April 26, 2006

Jay Maidenberg
Plant General Manager
Butterfly Press, LLC
2 Anderson Avenue
Moonachie, NJ 07074

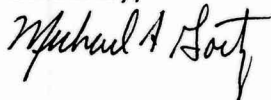
**RE: RCRA Subtitle C Site Identification Form
Subsequent Notification of Regulated Waste Activity**

Dear Jay:

Enclosed are two (2) bound copies of the RCRA Subtitle C Site Identification Form. Please sign and date both copies and mail one (1) copy to the USEPA using the enclosed cover letter, mailing label and return receipt paperwork. Retain one (1) copy for your records.

Should you have any questions, please do not hesitate to contact me at (215) 699-4800.

Sincerely,



Michael Goetz
Director of Business Development
Environmental Services

Enclosures

COMPLIANCE MANAGEMENT INTERNATIONAL

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ENVIRONMENTAL PROTECTION
AGENCY REGION II

2006 MAY 22 PM 12:01

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April 26, 2006

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Division of Environmental Planning and Protection
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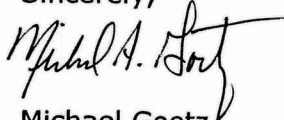
**Re: Butterfly Press, LLC - RCRA Subtitle C Site Identification Form
Subsequent Notification of Regulated Waste Activity**

To Whom It May Concern:

Enclosed is the RCRA Subtitle C Site Identification Form submitted on behalf of Butterfly Press, LLC located in Moonachie, NJ.

Should you have any questions, I may be contacted at: (215) 699-4800 or via e-mail: mgoetz@complianceplace.com.

Sincerely,



Michael Goetz
Director of Business Development
Environmental Services

Enclosure

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ENVIRONMENTAL PROTECTION
REGION II

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April 26, 2006

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